Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF PUERTO RICO, SAN JUAN DIVISION		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	GALO First name NIEVES Middle name TORRES Last name and Suffix (Sr., Jr., II, III)	_	CLARITZA First name RODRIGUEZ Middle name MERLO Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	GALO NIEVES		CLARITZA RODRIGUEZ
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4492		xxx-xx-8489

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		ESTANCIAS DE YAUCO RUBI STREET	RUBI STREET		
		B-21	B-21		
		Yauco, PR 00698	Yauco, PR 00698		
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Yauco	Yauco		
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it i here. Note that the court will send any notices to this mailing address.		
		ESTANCIAS DE YAUCO RUBI STREET	RUBI STREET		
		B-21	B-21		
		YAUCO, PR 00698	YAUCO, PR 00698		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I	Check one:		
		have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Debtor 1 Debtor 2

TORRES, GALO NIEVES & MERLO, CLARITZA RODRIGUEZ

Case number (if known)

Par	t 2: Tell the Court About Y	our Ba	ankruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are				each, see <i>Notice Required by 11</i> and check the appropriate box.	U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form			
	choosing to file under	☐ Chapter 7 ☐ Chapter 11							
		☐ Chapter 12							
		■ C	hapter 13						
8.	How you will pay the fee		about how yo	u may pay. Typica ey is submitting yo	with the clerk's office in your local court for more details elf, you may pay with cash, cashier's check, or money order. ttorney may pay with a credit card or check with a				
				y the fee in insta Installments (Office		sign and attach the Application for Individuals to Pay The			
			I request that	nt my fee be waiv o, waive your fee,	Yed (You may request this option of and may do so only if your income	only if you are filing for Chapter 7. By law, a judge may, but is a is less than 150% of the official poverty line that applies to be if you choose this option, you must fill out the Application			
					ee <i>Waived</i> (Official Form 103B) a				
9.	Have you filed for bankruptcy within the last 8 years?	■ No							
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy cases	■ No)						
	pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	es.						
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	■ No	Go to	line 12.					
	i coluctios :	☐ Ye	s. Has yo	our landlord obtair	ned an eviction judgment against	you?			
				No. Go to line 1	2.				
				Yes. Fill out <i>Initia</i> bankruptcy petiti		dgment Against You (Form 101A) and file it as part of this			

Debtor	1
Debtor	-

Debtor 1 Debtor 2 TORRES, GALO NIEVES & MERLO, CLARITZA RODRIGUEZ

Case number (if known)	
------------------------	--

Part	Report About Any Bus	sinesses \	ou Own a	as a Sole Proprieto	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of bus	iness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numb	er, Street, City, Stat	te & ZIP Code		
	to this petition.		Check	the appropriate box	x to describe your business:		
				Health Care Busin	less (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))		
				Commodity Broker	r (as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	f you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 J.S.C. 1116(1)(B).				
	For a definition of <i>small</i> business debtor, see 11 U.S.C. § 101(51D).	■ No.	I am n	ot filing under Chap	oter 11.		
		□ No.	I am fi Code.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.			
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Part	:4: Report if You Own or	Have Any	Hazardou	ıs Property or Any	Property That Needs Immediate Attention		
14.	Do you own or have any property that poses or is	■ No.					
	alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?	☐ Yes.	What is t	he hazard?			
				iate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?			
					Number, Street, City, State & Zip Code		

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Debtor 2

TORRES, GALO NIEVES & MERLO, CLARITZA RODRIGUEZ

C000	number	// I	
Case	numner	(if known)	

Pari			orting Purposes	amaniman debe 0.0		defined in 44 H C C C 404(0) == ""	
16.	What kind of debts do you have?		Are your debts primarily condividual primarily for a person			defined in 11 U.S.C.§ 101(8) as "incurre	ed by an
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
			Are your debts primarily b for a business or investment			ebts that you incurred to obtain money sor investment.	
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you or	we that are not consume	r debts or busin	ness debts	
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chapter	r 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	☐ Yes.	am filing under Chapter 7. Epaid that funds will be availab	Do you estimate that after ble to distribute to unsecu	r any exempt prured creditors?	operty is excluded and administrative exp	enses are
	administrative expenses		□ No				
	are paid that funds will be available for distribution to unsecured creditors?		□ Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999		□ 1,000-5,000 □ 5001-10,000 □ 10,001-25,00		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000	
19.	How much do you estimate your assets to be worth?	\$100,00	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - □ \$10,000,001 □ \$50,000,001 □ \$100,000,00	- \$50 million - \$100 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 bill □ \$10,000,000,001 - \$50 billion	lion
20.	How much do you estimate your liabilities to be?	\$100,00	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - □ \$10,000,001 □ \$50,000,001 □ \$100,000,00	- \$50 million - \$100 million	\$500,000,001 - \$1 billion \$1,000,000,001 - \$10 bil \$10,000,000,001 - \$50 b More than \$50 billion	llion
Par	7: Sign Below						
For	you	I have exar	nined this petition, and I decl	lare under penalty of perj	ury that the info	ormation provided is true and correct.	
						gible, under Chapter 7, 11,12, or 13 of ties to proceed under Chapter 7.	tle 11, United
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankru case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ GALO NIEVES TORRES /s/ CLARITZA RODRIGUEZ MERLO					
			IEVES TORRES of Debtor 1		CLARITZA Signature of D	RODRIGUEZ MERLO Debtor 2	
		Executed of	September 10, 201 MM / DD / YYYY	9	Executed on	September 10, 2019 MM / DD / YYYY	

Debtor	1
Debtor	2

TORRES, GALO NIEVES & MERLO, CLARITZA RODRIGUEZ

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

gc.		_	
	/s/ Peter S. Gonzalez	Date	September 10, 2019
	Signature of Attorney for Debtor		MM / DD / YYYY
	Peter S. Gonzalez		
	Printed name		
	Peter Santiago Gonzalez		
	Firm name		
	landinas da Barinanas A 40		
	Jardines de Borinquen A-12		
	Yauco, PR 00698		
	Number, Street, City, State & ZIP Code		
	Contact phone	Email address	quiebrapr@gmail.com
	304201		
	Bar number & State		

	Fill in thi	is information to identify your case:			
Deb	otor 1	GALO NIEVES TORRES			
		First Name Middle Name Last Name			
	otor 2 use if, filing)	CLARITZA RODRIGUEZ MERLO First Name			
	,				
Uni	ted States Bar	nkruptcy Court for the: DISTRICT OF PUERTO RICO, SAN JUAN DIVISION			
	se number _				
(if kn	iown)				ck if this is an
				ame	ended filing
<u>Of</u>	ficial Fo	<u>rm 106Sum</u>			
Su	mmary o	f Your Assets and Liabilities and Certain Statistical Information			12/15
info you	rmation. Fill o	nd accurate as possible. If two married people are filing together, both are equally responsible for so but all of your schedules first; then complete the information on this form. If you are filing amended his, you must fill out a new Summary and check the box at the top of this page. Arrive Your Assets			
					assets of what you own
1.	Schodulo A	/B: Property (Official Form 106A/B)			,
١.		e 55, Total real estate, from Schedule A/B		\$	115,000.00
	1b. Copy line	e 62, Total personal property, from Schedule A/B		\$_	43,181.23
	1c. Copy line	e 63, Total of all property on Schedule A/B		\$	158,181.23
Par	t 2: Summa	arize Your Liabilities			
				V OUT	liabilities
					int you owe
2.	Schedule D:	Creditors Who Have Claims Secured by Property (Official Form 106D)			
		e total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D		\$	155,470.68
3.		F: Creditors Who Have Unsecured Claims (Official Form 106E/F)		_	0.00
	3a. Copy th	e total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F		\$ <u> </u>	0.00
	3b. Copy th	e total claims from Part 2 (nonpriority unsecured claims) from line 6j &chedule E/F		\$	47,309.45
		Your total liabilities	\$_		202,780.13
Par	t 3: Summa	arize Your Income and Expenses			
4.		Your Income(Official Form 106I)			4 500 54
	Copy your co	ombined monthly income from line 12 oSchedule I		\$ <u> </u>	4,583.51
5.		Your Expenses (Official Form 106J) onthly expenses from line 22c of Schedule J		\$	4,143.51
Par		r These Questions for Administrative and Statistical Records			
6	Are ven fill	og for hankruntev under Chanters 7 14 or 122			
6.	-	ng for bankruptcy under Chapters 7, 11, or 13? I have nothing to report on this part of the form. Check this box and submit this form to the court with your oth	her s	sched	dules.
		5	.		
7	Yes	of debt de yeu have?			
7.	wnat kind o	of debt do you have?			
		ebts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a pee." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.	ersor	nal, f	amily, or household

Official Form 106Sum Summary of Your Asset

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,880.30

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in thi	is information to ide	ntify your case and	l th	is filing:			
Debtor 1	GALO NIEVES	TORRES					
	First Name	Middle Name	е	Last Name			
Debtor 2		DRIGUEZ MERLO					
(Spouse, if filing)	First Name	Middle Name	е	Last Name			
United States Ba	nkruptcy Court for the	DISTRICT OF P	PUE	ERTO RICO, SAN JUAN DIVISION			
Case number _							Check if this is an
							amended filing
Official Fo	rm 106A/B						
		4					
Schedul	e A/B: Pro	perty					12/15
think it fits best. Be information. If more Answer every ques	e as complete and accu e space is needed, atta tion.	urate as possible. If tw ch a separate sheet to	wo o th	only once. If an asset fits in more than one married people are filing together, both are c is form. On the top of any additional pages,	qually responsible	for supply	ring correct
Part 1: Describe	Each Residence, Build	ing, Land, or Other Re	eal	Estate You Own or Have an Interest In			_
1. Do you own or h	nave any legal or equita	ble interest in any res	sid	ence, building, land, or similar property?			
☐ No. Go to Part	t 2.						
Yes. Where is	s the property?						
1.1		W	/hat	is the property? Check all that apply			
	AS DE YAUCO	***	_		5		
RUBI B-2				Single-family home			s or exemptions. Put aims on Schedule D:
Street address,	if available, or other descrip	tion		Duplex or multi-unit building			Secured by Property.
				Condominium or cooperative			
				Manufactured or mobile home			
YAUCO	PR 0	0698	П	Land	Current value of t entire property?		Current value of the portion you own?
City	State	ZIP Code		Investment property	\$115,000		\$115,000.00
				Timeshare	. ,		
				Other			r ownership interest by by the entireties, or
		W	/ho	has an interest in the property? Check one	a life estate), if kr	•	,,,
				Debtor 1 only			
YAUCO				Debtor 2 only			
County				Debtor 1 and Debtor 2 only	01 - 1 - 16 (1.1)		
				At least one of the debtors and another	(see instructions		inity property
		Ot	the	r information you wish to add about this iter	n, such as local		
		pr	rop	erty identification number:			
				MENT HOUSE, 3 BEDROOMS, ATHROOMS, LIVING ROOM, KITC	HEN		
				Trincomo, Ervino Room, raro			
2. Add the dolla	ar value of the portic	on you own for all o	of y	our entries from Part 1, including any e	ntries for pages		6445 000 00
you have att	ached for Part 1. Wri	ite that number here	е		=>		\$115,000.00
Part 2: Describe	Your Vehicles						
				y vehicles, whether they are registered edule G: Executory Contracts and Unexp		ny vehicle:	s you own that
3. Cars, vans, tru	ucks, tractors, sport	utility vehicles, mo	oto	cycles			
■ No	· •						
☐ Yes							

Official Form 106A/B Schedule A/B: Property page 1

	ebtor 1 ebtor 2		TC	DRR	ES, (GALO NIEVES & MERLO, CLARITZA RODRIGUEZ Case number (if known,)
						otor homes, ATVs and other recreational vehicles, other vehicles, and accessories s, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	
	■ No						
	☐ Yes						
5						of the portion you own for all of your entries from Part 2, including any entries for pages r Part 2. Write that number here=>	\$0.00
Pa	art 3: De	esc	crib	e Yo	ır Per	sonal and Household Items	
	·				·	legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.						furnishings nces, furniture, linens, china, kitchenware	
	Yes.	. [Des	cribe			
						HOUSEHOLD GOODS AND FURNISHING	\$4,900.00
7.	Electror Example No Yes.	les	s: T iı	nclud	ling ce	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music colle ell phones, cameras, media players, games	ections; electronic devices
8.	Example No Yes.	les	s: A c	ntiqu olled	es an tions,	d figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, o memorabilia, collectibles	r baseball card collections; other
9.		les	s: S iı	ports nstru	, phot ments	and hobbies tographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and	d kayaks; carpentry tools; musical
10.	Firearn Examp No Yes.	ple	es:		·	es, shotguns, ammunition, and related equipment	
11.	Clothe Examp □ No ■ Yes.	ple				clothes, furs, leather coats, designer wear, shoes, accessories	
						USED CLOTHES	\$500.00
12.	Jewelry Examp □ No ■ Yes.	ple				ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold	
						FASHION JEWELRY	\$500.00
13.	Non-fa Examp ■ No □ Yes.	ple	es:	Dogs	, cats	, birds, horses	

De	torres, GALO NIEVE	S & MERLO, CLA	ARITZA RODRIGUEZ	Case number (if known)	
14.	. Any other personal and household i	tems you did not a	lready list, including any health	aids you did not list	
	■ No □ Yes. Give specific information				
	Tes. Give specific information			_	
15	5. Add the dollar value of all of your of Part 3. Write that number here			you have attached for	\$5,900.00
				·	
	Describe Your Financial Assets	ble interest in env	of the fellowing?		Current value of the
D	o you own or have any legal or equita	bie interest in any t	or the following:		portion you own? Do not deduct secured claims or exemptions.
16	. Cash				
10.	Examples: Money you have in your wa ■ No	llet, in your home, in	a safe deposit box, and on hand wh	nen you file your petition	
	☐ Yes				
17.	•		certificates of deposit; shares in cre the same institution, list each.	edit unions, brokerage hous	es, and other similar
	No		Institution name:		
	Yes		institution name.		
	17.1. C h	ecking Account	FIRST BANK #163201825946		\$100.00
	17.1. CI		#100201020340		Ψ100.00
18.	 Bonds, mutual funds, or publicly tra Examples: Bond funds, investment ac ■ No □ Yes Insti 		·		
19.	Non-publicly traded stock and interestions to be a second or continuous	ests in incorporated	d and unincorporated businesse	es, including an interest in	an LLC, partnership, and
	No				
	☐ Yes. Give specific information about Name of			% of ownership:	
20.	 Government and corporate bonds a Negotiable instruments include person Non-negotiable instruments are those No 	al checks, cashiers'	checks, promissory notes, and more	ney orders.	
	☐ Yes. Give specific information about	them			
	Issuer n				
21.	. Retirement or pension accounts Examples: Interests in IRA, ERISA, K □ No	eogh, 401(k), 403(b)), thrift savings accounts, or other	pension or profit-sharing pl	ans
	Yes. List each account separately.				
	Type of acc		Institution name:		
	401(k) or	Similar Plan	RETIREMENT		\$37,181.23
22.	. Security deposits and prepayments Your share of all unused deposits you Examples: Agreements with landlords,				or others
	■ No □ Yes		Institution name or individual:		
				,	
23.	Annuities (A contract for a periodic payNo	ment of money to yo	ou, either for life or for a number of y	years)	

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1

TORRES, GALO NIEVES & MERLO, CLARITZA RODRIGUEZ

	ebtor 1 ebtor 2	Т	ORRES	5, (GALO NIEVES	& MERLO	, CLARITZA R	RODRIGUEZ	_	Case number (if know	vn)	
	☐ Yes.				Issuer name and	description.						
24	24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No											
	Yes.				Institution name a	and descriptio	n. Separately file	the records of	any interes	sts.11 U.S.C. § 521(c)	:	
25	. Trusts	s, equ	itable o	or f	uture interests i	n property (d	other than anyth	ning listed in li	ine 1), and	d rights or powers ex	kercisab	le for your benefit
		. Giv	e specifi	ic i	nformation about	them						
26	Exam ■ No	nples:	Internet	do	trademarks, trac main names, web	sites, proceed			greements	S		
	☐ Yes.	. Giv	e specifi	ic i	nformation about	them						
27	Exam ■ No	iples:	Building	j pe	, and other gene ermits, exclusive I nformation about	censes, coop		on holdings, liqu	uor license	es, professional license	es	
N/I					d to you?	triem						Current value of the
14	ioney or	prop	erty Ow	VGC	a to you :							portion you own? Do not deduct secured claims or exemptions.
28	. Tax re	fund	s owed	to	you							
	■ No □ Yes.	. Give	specific	c in	formation about th	nem, includinç	g whether you alre	eady filed the re	eturns and	the tax years		
29	■ No	iples:	Past due		or lump sum alimo	ony, spousal :	support, child su	pport, maintena	ance, divo	orce settlement, prope	rty settle	ement
30			Unpaid v	wa	eone owes you ges, disability ins ans you made to			nefits, sick pay,	, vacation _l	pay, workers' compen	nsation, S	Social Security benefits;
	■ No □ Yes.	. Give	specific	c ir	nformation							
31	Exam				e policies ability, or life insu	rance; health	savings account	(HSA); credit, h	homeowne	er's, or renter's insuran	ice	
	■ No □ Yes.	. Nam	e the ins	sur	rance company of Company		nd list its value.		Benefici	iary:		Surrender or refund value:
32					erty that is due y ary of a living trus				v, or are cu	urrently entitled to recei	ive prope	erty because someone has
	■ No □ Yes.	. Give	specific	c ir	nformation							
33					parties, whether employment dis				demand f	for payment		
	☐ Yes.	. Des	cribe ea	ach	claim							
34	Other No	conti	ngent a	and	l unliquidated cl	aims of ever	y nature, includ	ling countercla	aims of th	ne debtor and rights t	to set of	ff claims
	☐ Yes.	. Des	cribe ea	ach	n claim							

Debtor 1 Debtor 2	TORRES, GALO NIEVES & MERLO, CLARITZA RODRIGUEZ	Case number (if known)	
35. Any fin	ancial assets you did not already list		
■ No			
⊔ Yes.	Give specific information		
	he dollar value of all of your entries from Part 4, including any entries fo		\$37,281.23
Part 5: De	scribe Any Business-Related Property You Own or Have an Interest In. List any r	eal estate in Part 1	
	own or have any legal or equitable interest in any business-related property?	our ostato in r urt ii	
□ No. Go			
Yes. G	to to line 38.		
			Current value of the portion you own? Do not deduct secured claims or exemptions.
38. Accou r	nts receivable or commissions you already earned		
■ No			
☐ Yes.	Describe		
39 Office 6	equipment, furnishings, and supplies		
Examp	les: Business-related computers, software, modems, printers, copiers, fax mar	chines, rugs, telephones, desks, chair	s, electronic devices
■ No	2 "		
⊔ Yes.	Describe		
40. Machi n	ery, fixtures, equipment, supplies you use in business, and tools of you	ır trade	
■ No			
☐ Yes.	Describe		
41. Invento	orv		
■ No	••		
☐ Yes.	Describe		
40 1-4			
42. Interes ☐ No	ts in partnerships or joint ventures		
■ Yes.	Give specific information about them		
	Name of entity:	% of ownership:	
	FACTORY RENT CORP.		
	CORPORATION CREATED TO ADMINISTER FUTURE BUSINESS. CURRENTLY NOT IN U		\$0.00
43. Custon No.	ner lists, mailing lists, or other compilations		
☐ Do you	r lists include personally identifiable information (as defined in 11 U.S.C. § 101(4	(A))?	
ı	No		
	☐ Yes. Describe		
44. Any bu	siness-related property you did not already list		

Official Form 106A/B Schedule A/B: Property page 5

■ No

Debtor 1

Deb Deb	TODDER CALONIEVER & MEDIO CLADIT	ZA RODRIGUEZ	Case number (if known)	
	Yes. Give specific information			
45.	Add the dollar value of all of your entries from Part 5, incl Part 5. Write that number here		es you have attached for	\$0.00
Part	6: Describe Any Farm- and Commercial Fishing-Related Property If you own or have an interest in farmland, list it in Part 1.	y You Own or Have an Interes	st In.	
	Do you own or have any legal or equitable interest in any fa	arm- or commercial fishing	related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in The	at You Did Not List Above		
	Do you have other property of any kind you did not already Examples: Season tickets, country club membership No 1 Yes. Give specific information	/ list?	_	
54.	Add the dollar value of all of your entries from Part 7. Write	te that number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$115,000.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$5,900.00		
58.	Part 4: Total financial assets, line 36	\$37,281.23		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+\$0.00		
62.	Total personal property. Add lines 56 through 61	\$43,181.23	Copy personal property total	\$43,181.23
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$158 181 23

	Fill in this information to identify you	r case:			
Dο	ebtor 1 GALO NIEVES TORRE				
	First Name	Middle Name	L	ast Name	
	ebtor 2 ouse if, filing) First Name	Middle Name	L	ast Name	
		TRICT OF PUERTO RIC	:O S/	AN JI IAN DIVISION	
011	ned diales Bankruptey Court for the.	THO OF TOLKTO INC	,0,0,	WY OOT WY DIVIDION	
	nown)				☐ Check if this is an
					amended filing
Of	fficial Form 106C				
Sc	chedule C: The Prope	erty You Cla	im	as Exempt	4/19
prop out a know	as complete and accurate as possible. If two months perty you listed on Schedule A/B: Property (Of and attach to this page as many copies of Parwn).	ficial Form 106A/B) as yo t 2: Additional Page as ne	ur sou cessa	arce, list the property that you claim a ary. On the top of any additional page	is exempt. If more space is needed, fill s, write your name and case number (if
spe app fund to a	each item of property you claim as exempt cific dollar amount as exempt. Alternatively clicable statutory limit. Some exemptions—ds—may be unlimited in dollar amount. Ho a particular dollar amount and the value of clicable statutory amount.	ly, you may claim the fu -such as those for healt owever, if you claim an e	II fair h aid exem	market value of the property beir s, rights to receive certain benefit ption of 100% of fair market value	ng exempted up to the amount of any s, and tax-exempt retirement under a law that limits the exemption
Pa	rt 1: Identify the Property You Claim as	Exempt			
1.	Which set of exemptions are you claiming	g? Check one only, even	if you	r spouse is filing with you.	
	☐ You are claiming state and federal nonban	kruptcy exemptions. 11 l	U.S.C	. § 522(b)(3)	
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/A	B that you claim as exer	npt, f	ill in the information below.	
	Brief description of the property and line on	Current value of the	Am	ount of the exemption you claim	Specific laws that allow exemption
	Schedule A/B that lists this property	portion you own Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
De	ebtor 1 Exemptions HOUSEHOLD GOODS AND	\$4,900.00	_		11 USC § 522(d)(3)
	FURNISHING	Ψ+,300.00		4000/ of foir resolution lands are to	000 3 0==(0)(0)
	Line from Schedule A/B. 6.1		•	100% of fair market value, up to any applicable statutory limit	
	USED CLOTHES	\$500.00			11 USC § 522(d)(3)
	Line from Schedule A/B. 11.1		•	100% of fair market value, up to any applicable statutory limit	
	FASHION JEWELRY	\$500.00			11 USC § 522(d)(4)
	Line from Schedule A/B. 12.1		•	100% of fair market value, up to any applicable statutory limit	
	FIRST BANK #163201825946	\$100.00		\$100.00	11 USC § 522(d)(5)
	Line from <i>Schedule A/B</i> : 17.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every No Yes. Did you acquire the property covery No Yes	3 years after that for case		, ,	

Official Form 106C

Fill	in this inform	nation to identify your c	ase:		
Del	otor 1				
		First Name	Middle Name	Last Name	
	otor 2 ouse if, filing)	CLARITZA RODR First Name	IGUEZ MERLO Middle Name	Last Name	
Uni	ted States Bar	nkruptcy Court for the:	DISTRICT OF PUERTO F	RICO, SAN JUAN DIVISION	
	se number				☐ Check if this is an amended filing
Of	ficial Fo	rm 106C			
Sc	chedule	e C: The Pro	perty You Cl	aim as Exempt	4/19
prop	erty you listed and attach to th	on Schedule A/B: Prope	rty (Official Form 106A/B) as	your source, list the property that yo	sible for supplying correct information. Using the you claim as exempt. If more space is needed, fill tional pages, write your name and case number (if
spe app func to a app	cific dollar and licable statuto dis—may be un particular dollicable statuto	nount as exempt. Altern ory limit. Some exempti nlimited in dollar amou llar amount and the val	atively, you may claim the ons—such as those for he nt. However, if you claim a ue of the property is deter	full fair market value of the prop alth aids, rights to receive certai n exemption of 100% of fair mark	u claim. One way of doing so is to state a operty being exempted up to the amount of an ain benefits, and tax-exempt retirement rket value under a law that limits the exemption our exemption would be limited to the
1.	Which set of	exemptions are you cla	niming? Check one only, ev	en if your spouse is filing with you.	
	☐ You are cla	iming state and federal n	onbankruptcy exemptions. 1	1 U.S.C. § 522(b)(3)	
	■ You are cla	iming federal exemptions	. 11 U.S.C. § 522(b)(2)		
2.	For any prop	erty you list on Schedu	ıle A/B that you claim as ex	cempt, fill in the information belo	low.
		on of the property and line that lists this property	on Current value of the portion you own	Amount of the exemption you o	claim Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exer	emption.
<u>De</u>	btor 2 Exem RETIREME Line from Sch		\$37,181.23	<u> </u>	11 USC § 522(d)(12)
				 100% of fair market value any applicable statutory 	· ·
3.			aption of more than \$170,33 every 3 years after that for ca	50? Ises filed on or after the date of adju	justment.)

	Fill in this	information to ident	ify your case:			
Deb	tor 1	GALO NIEVES	TORRES			
		First Name	Middle Name Last Name)	
Deb	tor 2	CLARITZA ROD	RIGUEZ MERLO			
(Spot	ise if, filing)	First Name	Middle Name Last Name			
Unit	ed States Banl	kruptcy Court for the:	DISTRICT OF PUERTO RICO, SAN JUAN D	DIVISION		
Cas	e number					
(if kno					☐ Check	if this is an
					ameno	led filing
						-
Offi	cial Form	106D				
Sc	hedule [)· Creditors	Who Have Claims Secured	d by Property	V	12/15
<u> </u>	nedate i	3. Orcartors	Who have drains seedied	a by Tropert	y	12/10
	ed, copy the Ad		two married people are filing together, both are equ , number the entries, and attach it to this form. On th			
	•	ave claims secured by	vour property?			
		-		h.a		
l	⊔ No. Check t —	nis box and submit thi	s form to the court with your other schedules. You	nave nothing else to re	port on this form.	
	Yes. Fill in a	all of the information be	elow.			
Part	1: List All	Secured Claims				
			nore than one secured claim, list the creditor separately	Column A	Column B	Column C
for ea	ach claim. If mo	re than one creditor has	a particular claim, list the other creditors in Part 2. As all order according to the creditor 's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
	BANCO DE	:		value of collateral.	Cidiiii	If any
2.1	DESARRO					
	ECONOMIC	_	Describe the property that secures the claim:	\$126,861.00	\$115,000.00	\$40,470.68
	Creditor's Name		RUBI B-21, YAUCO, PR 00698 CEMENT HOUSE, 3 BEDROOMS, 2 BATHROOMS, LIVING ROOM, KITCHEN.			
	PO Box 21	2.1	As of the date you file, the claim is: Check all that			
	San Juan,	-	apply.			
		City, State & Zip Code	Contingent			
	Number, Street, v	City, State & Zip Code	Unliquidated			
Who	owes the deb	t? Check one	Disputed Nature of lien. Check all that apply.			
_	ebtor 1 only	CI Officer offic.		urad		
_	ebtor 2 only			cureu		
_	ebtor 1 and Deb	stor 2 only	_ ′			
_		•	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
_		e debtors and another	_			
	heck if this claic community deb		Other (including a right to offset)			
Date	debt was incur	red	Last 4 digits of account number			

Debtor 1 GALO NIEVES TORRES		Case number (f known)					
First Name Middle Na	me Last Name						
Debtor 2 CLARITZA RODRIGUEZ							
First Name Middle Na	me Last Name						
2.2 BANCO POPULAR	Describe the property that secures the claim:	\$28,609.68	\$115,000.00	\$0.00			
Creditor's Name	RUBI B-21, YAUCO, PR 00698						
	CEMENT HOUSE, 3 BEDROOMS, 2 BATHROOMS, LIVING ROOM, KITCHEN.						
PO Box 362708	As of the date you file, the claim is: Check all tha	at .					
San Juan, PR 00936-2708	apply. Contingent						
Number, Street, City, State & Zip Code	☐ Unliquidated						
ramson, shoot, shy, shall a zip sous	☐ Disputed						
Who owes the debt? Check one.	Nature of lien. Check all that apply.						
■ Debtor 1 only	☐ An agreement you made (such as mortgage o	r secured					
Debtor 2 only	car loan)						
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lier	n)					
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	'/					
Check if this claim relates to a community debt	Other (including a right to offset)						
Date debt was incurred	Last 4 digits of account number 04	16					
Add the dollar value of your entries in Colu	ımn A on this page. Write that number here:	\$155,470.6	8				
If this is the last page of your form, add the	dollar value totals from all pages.	\$155,470.6	7				
Write that number here:		Ψ133,470.0	9				
Part 2: List Others to Be Notified for	a Debt That You Already Listed						
trying to collect from you for a debt you ow	notified about your bankruptcy for a debt that you to someone else, list the creditor in Part 1, ary you listed in Part 1, list the additional creditors is page.	nd then list the collection agen	cy here. Similarly, if you ha	ive more			
Name, Number, Street, City, State & Zi ISLAND PORTFOLIO SERVI PO Box 361110	CES, LLC	which line in Part 1 did you ente	r the creditor? 2.1				

Fill in this inf	formation to identify your cas	se:	
Debtor 1	CALO NIEVES TORRI	ES	
Debior 1	GALO NIEVES TORRI First Name	Middle Name Last Name	
Debtor 2	CLARITZA RODRIGUI	EZ MERLO	
(Spouse if, filing)	First Name	Middle Name Last Name	
United States Ba	ankruptcy Court for the: DIS	STRICT OF PUERTO RICO, SAN JUAN DIVISION	
Case number (if known)			☐ Check if this is an amended filing
Official For		Have Unsecured Claims	12/15
any executory con Schedule G: Exect D: Creditors Who the Continuation F	ntracts or unexpired leases that c utory Contracts and Unexpired L Have Claims Secured by Propert Page to this page. If you have no	t 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY could result in a claim. Also list executory contracts on Schedule A/B: Property (Ceases (Official Form 106G). Do not include any creditors with partially secured clay. If more space is needed, copy the Part you need, fill it out, number the entries in information to report in a Part, do not file that Part. On the top of any additional parts.	official Form 106A/B) and on hims that are listed in Schedule In the boxes on the left. Attach
case number (if kn	nown). All of Your PRIORITY Unsecu	red Claims	
	ors have priority unsecured clair		
No. Go to	Part 2.		
☐ Yes.			
— 100.			
Part 2: List A	All of Your NONPRIORITY Uns	secured Claims	
3. Do any credit	ors have nonpriority unsecured	claims against you?	
☐ No. You ha	ave nothing to report in this part. Su	ubmit this form to the court with your other schedules.	
Yes.			
unsecured cla	im, list the creditor separately for ea	in the alphabetical order of the creditor who holds each claim. If a creditor has more ach claim. For each claim listed, identify what type of claim it is. Do not list claims alread other creditors in Part 3.If you have more than three nonpriority unsecured claims fill our	ly included in Part 1. If more
			Total claim
4800	ACION DE RESIDENTES		
	ICIAS DE YA	Last 4 digits of account number 7B21	\$7,331.45
Nonpriori	ty Creditor's Name		
PO Bo	v 4060	When was the debt incurred?	
	non, PR 00958-1069		
	Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who inc	urred the debt? Check one.		
■ Debto	or 1 only	☐ Contingent	
☐ Debto	or 2 only	☐ Unliquidated	
☐ Debto	or 1 and Debtor 2 only	☐ Disputed	
☐ At lea	st one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Chec	k if this claim is for a community		
debt Is the cla	nim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did report as priority claims	not
■ No	-	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes		Other Specify	

	r 1 TORRES, GALO NIEVES & MERLO RODRIGUEZ	O, CLARITZA Case number (f known)	
4.2	BANCO POPULAR	Last 4 digits of account number	\$10,000.00
	Nonpriority Creditor's Name		ψ10,000.00
	PO Box 362708	When was the debt incurred?	
	San Juan, PR 00936-2708		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt	_ *****	
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify PERSONAL LOAN	
4.3	CARIBE COOP	Last 4 digits of account number 4652	\$10,000.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	APARTADO 464	when was the debt incurred?	
	GUAYANILLA, PR 00656-0464		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify	
4.4	DTOP	Last 4 digits of account number 0561	\$895.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 195349		
	San Juan, PR 00919-5349	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	■ Other. Specify 7798673	

	r 1 TORRES, GALO NIEVES & MERLO r 2 RODRIGUEZ	Case number (f known)	
4.5	SANTA ASTACIO ALMODOVAR	Last 4 digits of account number	\$10,483.00
	Nonpriority Creditor's Name		ψ : σ, :σσ:σσ
	PO BOX 1254	When was the debt incurred?	
	Lajas, PR 00667		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.6	SMALL BUSINESS ADMINISTRATION	Last 4 digits of account number 7010	\$5,600.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 3918		
	Portland, OR 97208-3918	_	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.7	SUC. ENRIQUE MATTEI CINTRON	Last 4 digits of account number	\$3,000.00
	Nonpriority Creditor's Name	<u> </u>	40,00000
	Box 5008 PMB 155	When was the debt incurred?	
	YAUCO, PR 00698 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, to on the date you may also of the an area apply	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	■ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify LAW SUIT DEBT COLLECTION	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Debtor 1 TORRES, GALO NIEVES & N Debtor 2 RODRIGUEZ	IERLO, CLARITZA	Case n	umber (if kn	own)
have more than one creditor for any of the deb notified for any debts in Parts 1 or 2, do not fill		he additional cre	editors here	e. If you do not have additional persons to be
Name and Address ARCELY RIVERA RODRIGUEZ Box 5008 PMB 155 YAUCO, PR 00698	On which entry in Part 1 or Part 2 Line 4.7 of (<i>Check one</i>):	☐ Part 1:	Creditors wi	tor? th Priority Unsecured Claims th Nonpriority Unsecured Claims
	Last 4 digits of account number			
Name and Address GUSTAVO MATTEI RIVERA 1301 Springridge Rd Gautier, MS 39553-3132	On which entry in Part 1 or Part 2 Line 4.7 of (<i>Check one</i>): Last 4 digits of account number	Part 1:	Creditors wi	tor? th Priority Unsecured Claims th Nonpriority Unsecured Claims
Name and Address LIC ANGEL AVILES MERCADO PO BOX 1254 Lajas, PR 00667	On which entry in Part 1 or Part 2 Line 4.5 of (Check one): Last 4 digits of account number	Part 1:	Creditors wi	tor? th Priority Unsecured Claims th Nonpriority Unsecured Claims
Name and Address LUIS E MATTEI RIVERA 723 Orange St Ocean Springs, MS 39564-0703	On which entry in Part 1 or Part 2 Line 4.7 of (Check one): Last 4 digits of account number	Part 1:	Creditors wi	tor? th Priority Unsecured Claims th Nonpriority Unsecured Claims
Part 4: Add the Amounts for Each Type	of Unsecured Claim			
Total the amounts of certain types of unsecure type of unsecured claim.		istical reporting	purposes o	only. 28 U.S.C. §159. Add the amounts for each
				Total Claim
6a. Domestic support oblig	ations	6a.	\$	0.00

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 47,309.45
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 47,309.45

Fill in this	s information to identif	y your case:			
Debtor 1	GALO NIEVES TO	ORRES			
	First Name	Middle Name	Last Name)	
Debtor 2	CLARITZA RODR	IGUEZ MERLO			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		DISTRICT OF PUERTO	O RICO, SAN JUAN DIVISION		
Case number				☐ Check if this is a amended filing	an

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Name Number Street State ZIP Code		Person or	r company with Name, Number	whom you have the , Street, City, State and ZIP	contract or lease	State what the contract or lease is for
Number Street City State ZIP Code 2.2 Name Number Street City State ZIP Code 2.3 Name ZIP Code City State ZIP Code 2.4 Name ZIP Code Number Street ZIP Code 2.5 Name Number Number Street Street	2.1					
City State ZIP Code 2.2 Name Number Street City State ZIP Code 2.3 Name City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street Number Street		Name				
Number Street		Number	Street			_
Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street Street Street Street Street Street Street Street Street Number Street		City		State	ZIP Code	_
Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street Street Street Street Street Street Street Street Street Number Street	2.2					
City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street		Name				_
2.3			Street			_
2.3		City		State	ZIP Code	_
Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street	2.3					
City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street		Name				_
2.4 Name Number Street City State ZIP Code 2.5 Name Number Street		Number	Street			_
Number Street City State ZIP Code 2.5 Name Number Street		City		State	ZIP Code	_
Number Street City State ZIP Code 2.5 Name Number Street	2.4					
City State ZIP Code 2.5 Name Number Street		Name				<u> </u>
Name Number Street			Street			
Number Street		City		State	ZIP Code	
Number Street	2.5					
		Name				
City State ZIP Code			Street			_
		City		State	ZIP Code	

Fill in th	nis information to identi	fy your case:			1	
Debtor 1	GALO NIEVES TO					
Debtor 2	First Name CLARITZA RODE	Middle Name	Last Name			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	DISTRICT OF PUERTO R	ICO, SAN JUAN DIVISION			
Case number (if known)					☐ Check if the amended to	
Official Fo	orm 106H • H: Your Cod	ebtors				12/15
are filing togeth and number the	er, both are equally resp	e also liable for any debts y consible for supplying corre the left. Attach the Addition question.	ct information. If more space	ce is needed, o	copy the Additional Pa	ge, fill it out,
1. Do you h	ave any codebtors? (If y	ou are filing a joint case, do no	ot list either spouse as a codel	btor.		
□ No ■ Yes						
		lived in a community prope New Mexico, Puerto Rico, Te			/ states and territories in	clude Arizona,
■ No. Go to		se, or legal equivalent live with	you at the time?			
line 2 again	as a codebtor only if th	ors. Do not include your spo at person is a guarantor or 106E/F), or Schedule G (Offi	cosigner. Make sure you ha	ave listed the o	reditor on Schedule D	(Official Forn
	nn 1: Your codebtor Number, Street, City, State and Z	IP Code		olumn 2: The cr neck all schedu	reditor to whom you ov les that apply:	ve the debt
EST/ RUB	RY GISELL NIEVES F ANCIAS DE YAUCO I STRET B-21 CO, PR 00698	RODRIGUEZ		Schedule G	line <u>2.1</u> F, line	омісо

Fill	in this information to	o identify your cas	se:							
De	btor 1	GALO NIEVE	S TORRES			_				
1	btor 2 ouse, if filing)	CLARITZA R	ODRIGUEZ MERLO			_				
Un	ited States Bankrup	tcy Court for the:	DISTRICT OF PUERT DIVISION	O RICO, SAN JUAN	I	_				
	se number						Check if this is: An amende A supplement income as of	nt showi	ng postpetition o	chapter 13
<u>O</u>	fficial Form	<u> 106l</u>					MM / DD/ Y	YYY		
S	chedule I:	Your Inco	me							12/15
sup spo atta	oplying correct info buse. If you are sep ach a separate shee	rmation. If you a arated and your	ole. If two married people married and not filing spouse is not filing with the top of any addition	g jointly, and your s n you, do not includ	pouse is le informa	living w tion abo	ith you, includ out your spou	le inforn se. If mo	nation about your re space is ne	our eded,
1.	Fill in your emploinformation.	oyment		Debtor 1			Debtor 2	or non-	filing spouse	
	If you have more t		Employment status*	■ Employed			■ Emplo	yed		
	attach a separate information about		Employment status*	☐ Not employed		☐ Not employed				
	employers.		Occupation	VENTAS			See Sc	hedule	Attached	
	Include part-time, self-employed wor		Employer's name	PERIODICO EL	SOL DE	PR				
	Occupation may i homemaker, if it a		Employer's address							
			How long employed th	<u>. , ,</u>		اد اد A ما ما			forms at law	
	ai p			*See Att	achment	for Add	itional Employ	ment In	rormation	
Est i unle	imate monthly inco	d.	e you file this form. If you than one employer, comb		·				·	
	ce, attach a separate								·	
						For	Debtor 1		ebtor 2 or iling spouse	
2.			, and commissions (bef culate what the monthly w		2.	\$	1,560.35	\$	3,986.82	
3.	Estimate and list	monthly overting	пе рау.		3.	+\$	0.00	+\$_	0.00	
4.	Calculate gross	Income. Add line	2 + line 3.		4.	\$	1,560.35	\$_	3,986.82	

Debtor 1 Debtor 2

TORRES, GALO NIEVES & MERLO, CLARITZA RODRIGUEZ

Case number (if known)

				FOL	Debtor 1		ebtor 2 or	
	Copy	line 4 here	4.	\$	1,560.35	\$	ing spouse 3,986.82	
		/ line 4 nere		*—	1,000.00	Ť——	0,500.02	
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	432.13	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	281.32	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify: PLAN MEDICO	5h.+	\$	0.00	+ \$	248.58	
		SUPLEMT		\$	0.00	\$	1.63	
6.	Add t	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	963.66	
7.	Calcu	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,560.35	\$	3,023.16	
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0.0	ф	0.00	·	0.00	
	O.L.	monthly net income.	8a.	*—	0.00	\$	0.00	
	8b. 8c.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8d. 8e. 8f.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8c. 8d. 8e.	\$ \$ \$	0.00 0.00 0.00	\$ \$ \$	0.00 0.00 0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	0.00	
9.	Add a	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
10.	Calcu	ulate monthly income. Add line 7 + line 9.	10. \$	1	,560.35 + \$	3,023	3.16 = \$ 4,	583.51
		he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	'-		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0,02		
11.	1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00							
12.		the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certain					12. \$ 4,	583.51
13.	Do yo	ou expect an increase or decrease within the year after you file this form No. Yes. Explain:	?				monthly in	

Case number (if known)	
------------------------	--

Official Form B 6I Attachment for Additional Employment Information

Spouse	
Occupation	TEACHER
Name of Employer	SISTEMA UNIVERSITARIO ANA G. MENDEZ
How long employed	3 years
Address of Employer	PO Box 21345
	San Juan, PR 00928-1345
Spouse	
Occupation	COORDINATOR
Name of Employer	YAUCO HEALTH CARE CORP
How long employed	35 years
Address of Employer	PO Box 5643
	Yauco, PR 00698-5643

Fill	in this informa	ation to identify yo	ur case:					
Deb	otor 1	GALO NIEVI	ES TORR	ES		Check	if this is:	
	otor 2 ouse, if filing)	CLARITZA R	ODRIGU	EZ MERLO			An amended filing A supplement show expenses as of the	ring postpetition chapter 13 following date:
Unit	ted States Bank	ruptcy Court for the	: DISTRI	CT OF PUERTO RICO, SA	AN JUAN	<u> </u>	/IM / DD / YYYY	
	se number known)							
0	fficial Fo	orm 106J				I		
S	chedule	J: Your I	Expen	ses				12/1
info	ormation. If m known). Ansv	nore space is nee ver every question ribe Your House	eded, attac on.	If two married people are th another sheet to this fo				supplying correct ur name and case number
١.	□ No. Go to							
	_	es Debtor 2 live i	n a separa	te household?				
	_ 100. 20 0		n a copara	no nouconola i				
			st file Offici	al Form 106J-2, <i>Expenses</i> :	for Separate Househ	old of Debtor	2.	
•				-,, - -,				
2.	•	e dependents?	☐ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state	the						■ No
	dependents				Daughter		32	☐ Yes
								■ No
					GrandCHILD		5	Yes
								□ No
								☐ Yes ☐ No
								□ No □ Yes
3.	Do vour ex	penses include	_	No				□ 163
	expenses of	f people other th	nan ┌─	Yes				
	yourself an	d your depender	nts? □	res				
Est	timate your e	a date after the b	our bankru	y Expenses ptcy filing date unless yo is filed. If this is a suppl				
val	ue of such as	ssistance and ha		overnment assistance if d it on Schedule I: Your I			Your exp	enses
(UI	fficial Form 10	. <i>)</i>					, cai exp	J550
4.		or home owners and any rent for the		ses for your residence. In lot.	clude first mortgage	4. \$		436.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
		erty, homeowner's	, or renter's	insurance		4b. \$		0.00
	4c. Home	e maintenance, re	pair, and u	pkeep expenses		4c. \$		75.00
		eowner's associati				4d. \$		0.00
5.	Additional	mortgage payme	ents for yo	ur residence, such as hon	ne equity loans	5. \$		1,622.00

TORRES, GALO NIEVES & MERLO, CLARITZA Debtor 1 Debtor 2 RODRIGUEZ Case number (if known) 6. **Utilities:** Electricity, heat, natural gas 6a. \$ 6a. 125.51 6h 6b. \$ Water, sewer, garbage collection 100.00 6c. \$ 6c. Telephone, cell phone, Internet, satellite, and cable services 180.00 6d. Other. Specify: 6d. \$ 0.00 Food and housekeeping supplies 7. \$ 370.00 Childcare and children's education costs 8. \$ 235.00 9. Clothing, laundry, and dry cleaning 9. \$ 25.00 10. Personal care products and services 10. \$ 75.00 11. Medical and dental expenses 11. \$ 50.00 12. Transportation. Include gas, maintenance, bus or train fare. 250.00 12. \$ Do not include car payments. 100.00 Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ Charitable contributions and religious donations 14. 0.00 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. 0.00 15b. Health insurance 15b. \$ 0.00 15c. \$ 15c. Vehicle insurance 0.00 15d. Other insurance. Specify: 15d. 0.00 16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17c. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 18. Your payments of alimony, maintenance, and support that you did not report as 0.00 18. \$ deducted from your pay on line 5, Schedule I, Your Income (Official Form 106l). 500.00 Other payments you make to support others who do not live with you. Specify: **DAUGTHER** 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 0.00 20a. \$ 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. \$ 20e. Homeowner's association or condominium dues 0.00 21. Other: Specify: 21. +\$ 0.00 22. Calculate your monthly expenses 22a. Add lines 4 through 21. \$ 4,143.51 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ 22c. Add line 22a and 22b. The result is your monthly expenses. 4,143.51 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 4,583.51 23b. Copy your monthly expenses from line 22c above. 23h 4,143.51 Subtract your monthly expenses from your monthly income. 23c. 440.00 23c The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? ■ No. ☐ Yes. Explain here:

Fill in this in	formation to identify w	NIK COCCI	
	formation to identify ye		
Debtor 1	GALO NIEVES TO		
D.1.	First Name	Middle Name Last Name	}
Debtor 2 (Spouse if, filing)	CLARITZA RODE	IGUEZ MERLO Middle Name Last Name	
(Spouse II, IIIIIIg)	First Name	Middle Name Last Name	
United States Bar	nkruptcy Court for the:	DISTRICT OF PUERTO RICO, SAN JUAN DIVISION	
Case number			
(if known)			☐ Check if this is an
			amended filing
Official Forn	n 106Dec		
Declarat	ion About a	n Individual Debtor's Sched	dules 12/15
f two married pe	ople are filing together	both are equally responsible for supplying correct infor-	mation.
·			
		e bankruptcy schedules or amended schedules. Making	
	or property by fraud in 3 U.S.C. §§ 152, 1341, 1	connection with a bankruptcy case can result in fines up	p to \$250,000, or imprisonment for up to 20
years, or botti. To	5 U.S.C. 99 132, 1341, 1	15, and 3571.	
Sign	n Below		
O.g.			
Did you na	or agree to hav some	one who is NOT an attorney to help you fill out bankrupto	ov forme?
Did you pay	or agree to pay some	one who is NOT an attorney to help you fill out bankrupto	cy forms?
■ No			
_			
☐ Yes. N	lame of person		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
			Deciaration, and Signature (Official Form 119)
Under penal	ty of perjury, I declare	hat I have read the summary and schedules filed with thi	is declaration and
that they are	true and correct.	•	
X /s/ GAI	O NIEVES TORRES	X /s/ CLARITZA RO	DDRIGHEZ MERLO
	NIEVES TORRES	CLARITZA RODR	
	e of Debtor 1	Signature of Debtor 2	
- 3		3	
Date _	September 10, 2019	Date Septembe	r 10, 2019

	Fill in this	s information to identi	ify your case:					
De	btor 1	GALO NIEVES 7 First Name	TORRES Middle Name	Last Name				
De	btor 2		RIGUEZ MERLO	<u> Laot Hamo</u>				
(Sp	ouse if, filing)	First Name	Middle Name	Last Name				
Un	ited States Bar	nkruptcy Court for the:	DISTRICT OF PUERTO I	RICO, SAN JUAN DIVISIO	N			
	se number				<u> </u>	Check if this is an amended filing		
St		of Financial	Affairs for Individ			4/19		
info	rmation. If m				equally responsible for supply additional pages, write your			
Pa	rt 1: Give D	Details About Your Ma	erital Status and Where You	Lived Before				
1.	What is your	current marital statu	s?					
	■ Married□ Not mar	ried						
2.	During the la	g the last 3 years, have you lived anywhere other than where you live now?						
	■ No □ Yes. Lis	t all of the places you liv	ved in the last 3 years. Do not i	nclude where you live now.				
	Debtor 1 Pri	ior Address:	Dates Debtor 1 there	Debtor 2 Prior A	Address:	Dates Debtor 2 lived there		
3. stat					nity property state or territory' Rico, Texas, Washington and Wi			
	■ No							
	☐ Yes. Ma	ke sure you fill out Scho	edule H: Your Codebtors (Offic	cial Form 106H).				
Pa	rt 2 Explai	n the Sources of You	r Income					
4.	Fill in the tota	I amount of income yo	nployment or from operating u received from all jobs and a nave income that you receive to	Il businesses, including par		dar years?		
	□ No							
	Yes. Fill	in the details.						
			Debtor 1		Debtor 2			
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
	•	of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$25,935.00		
			☐ Operating a business		☐ Operating a business			

Debtor	1
Debtor	2

TORRES, GALO NIEVES & MERLO, CLARITZA RODRIGUEZ

Case number (if known)

			Baldan 4		Dalitan O		
			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of incommendation Check all that a		Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2018)		☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, combonuses, tips	missions,	\$36,398.00	
			☐ Operating a business		☐ Operating a	ousiness	
For the caler (January 1 to	•		☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, combonuses, tips	missions,	\$39,804.00
			☐ Operating a business		☐ Operating a	ousiness	
For the caler (January 1 to		31, 2016)	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, combonuses, tips	missions,	\$36,976.00
			☐ Operating a business		☐ Operating a	ousiness	
■ No	source and the source and the source	•	me from each source separatel	y. Do not include income that	you listed in line 4.		
			Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inc Describe below.	ome	Gross income (before deductions and exclusions)
Part 3: Lis	at Cartain Da	umanta Vau	Made Before You Filed for B	,			
	er Debtor 1's Neither De individual p	or Debtor 2' ebtor 1 nor D primarily for a	s debts primarily consumer of bebtor 2 has primarily consur personal, family, or household p	debts? ner debts. Consumer debts ourpose."		.S.C. § 101(8) as "incurred by an
	During the No.	90 days befo	re you filed for bankruptcy, did y	you pay any creditor a total of	\$6,825* or more?		
	□ Yes	List below e	each creditor to whom you paid on the include payments for don on attorney for this bankrupte	nestic support obligations, s			
	* Subject	to adjustment	on 4/01/22 and every 3 years a	after that for cases filed on or	after the date of ad	ustment.	
Yes			r both have primarily consur re you filed for bankruptcy, did		\$600 or more?		
	■ No.	Go to line 7	7 .				
	□ _{Yes}		each creditor to whom you paid or domestic support obligations ptcy case.				
Credito	r's Name and	d Address	Dates of payme	nt Total amount	Amount you still owe	Was this p	ayment for
				palu	Sun Owe		

7.	Within 1 year before you filed for bankruptour Insiders include your relatives; any general partny which you are an officer, director, person in control business you operate as a sole proprietor. 11 U. No Yes. List all payments to an insider.	ers; relatives of any general rol, or owner of 20% or mor	partners; partnershi e of their voting secu	ips of which yourities; and any	ou are a general pa managing agent,	rtner; corporations of including one for a	
	Insider's Name and Address	Dates of payment	Total amount paid	Amount y		or this payment	
8.	Within 1 year before you filed for bankruptcinsider? Include payments on debts guaranteed or cosign		•			ebt that benefited an	
	■ No						
	☐ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount y still o		or this payment editor's name	
Par	t 4: Identify Legal Actions, Repossessions	s, and Foreclosures					
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury of and contract disputes. No Yes. Fill in the details.						
	Case title Case number	Nature of the case	Court or agency		Status of	Status of the case	
	BANCO POPULAR DE PUERTO RICO V.S GALO NIEVES TORRES JHCI201400683 PONCE COURT 2150 Avenida Santiago de los Caballeros PONCE, PR 00716		Pendir On app Conclu	peal			
	SANTA ASTACIO ALMODOVAR V.S GALO NIEVES TORRES J4CI201700051	DEBT COLLECTION	PONCE COUR 2150 Avenida los Caballeros PONCE, PR 00	Santiago de	☐ Pendir ☐ On app ☐ Conclu	peal	
	COOPERATIVA DE AHORRO Y CREDITO COOP V.S GALO NIEVES TORRES J4CI200400509 DEBT COLLECTION OF YAUCO Calle 65 Infantería, Esquina Calle Visal Yauco, PR 00698			☐ On app	peal		
10.	Within 1 year before you filed for bankruptc. Check all that apply and fill in the details below. No. Go to line 11.		rty repossessed, fo	ereclosed, ga	rnished, attached	l, seized, or levied?	
	Yes. Fill in the information below.						
	Preditor Name and Address Describe the Property Explain what happened			Date	Value of the property		
11.	Within 90 days before you filed for bankrupt accounts or refuse to make a payment beca No Yes. Fill in the details.	cy, did any creditor, inclu		ancial institut	ion, set off any a	mounts from your	
	Creditor Name and Address Describe the action the creditor took Date				Date action was	Amount	

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

made

	transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.							
	Person Who Received Transfer Address Person's relationship to you	Description and vo		Describe any property or payments received or debts paid in exchange	Date transfer was made			
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No □ Yes. Fill in the details.		property to a self-	settled trust or similar device of	which you are a			
	Name of trust	Description and v	alue of the property	transferred	Date Transfer was			
Par	t 8: List of Certain Financial Accounts, Instru	umanta Safa Danasit I	Payon and Starage	Unito	made			
		were any financial acc	ounts or instrumen	ts held in your name, or for you				
		ast 4 digits of account number	Type of account of instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	cash, or other valuables?	ır before you filed for I	oankruptcy, any sa	fe deposit box or other depositor	ry for securities,			
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, St and ZIP Code)		scribe the contents	Do you still have it?			
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St and ZIP Code)		scribe the contents	Do you still have it?			
Par	t 9: Identify Property You Hold or Control for	r Someone Else						
23.	someone.	eone else owns? Includ	de any property you	u borrowed from, are storing for,	or hold in trust for			
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		scribe the property	Value			
Par	t 10: Give Details About Environmental Inform	nation						

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations Official Form 107

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

For the purpose of Part 10, the following definitions apply:

Debtor 1 TORRES, GALO NIEVES & MERLO, CLARITZA RODRIGUEZ Debtor 2

Case number (if known)

controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

₹ер	ort a	Il notices, releases, and proceedings tha	t you know about, regardless of when th	еу	occurred.						
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?										
	■ No □ Yes. Fill in the details.										
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice					
25.	Hav	e you notified any governmental unit of	any release of hazardous material?								
		■ No □ Yes. Fill in the details.									
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice					
26.	Hav	e you been a party in any judicial or adm	ninistrative proceeding under any enviro	nm	ental law? Include settlements an	d orders.					
	■ No □ Yes. Fill in the details.										
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case					
Par	t 11:	Give Details About Your Business or 0	,								
		hin 4 years before you filed for bankrupte	•	of t	he following connections to any b	ousiness?					
		_ ` ` ` ` `	n a trade, profession, or other activity, eit		,						
		☐ A member of a limited liability compa	mpany (LLC) or limited liability partnership (LLP)								
		☐ A partner in a partnership									
		☐ An officer, director, or managing exe	ecutive of a corporation								
		☐ An owner of at least 5% of the voting	or equity securities of a corporation								
		No. None of the above applies. Go to P	art 12.								
		Yes. Check all that apply above and fill	in the details below for each business.								
	Ad	siness Name dress mber, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper		Employer Identification number Do not include Social Security number or ITIN.						
	(, ,	Name of accountant of bookkeeper		Dates business existed						
	ES	CTORY RENT CORP TANCIAS DE YAUCO RUBI B21 LUCO, PR 00698	ADMINISTRATION OF FACILITIES NOT IN USE	3	EIN: From-To NOVEMBER 2019						
	1 14	1000, FIX 000 3 0	GALO NIEVES RODRIGUEZ								

Debto		LO, CLARITZA	RODRIGUEZ	Case number (if known)
	lithin 2 years before you filed for bankruptostitutions, creditors, or other parties.	cy, did you give	a financial statement	to anyone about your business? Include all financial
	- 110			
1	Name Address Number, Street, City, State and ZIP Code)	Date Issued		
Part 1	2: Sign Below			
true ar bankru 18 U.S /s/ G		e statement, cond 0, or imprisonment /s/ CL CLAR	cealing property, or o	JEZ MERLO
Date	September 10, 2019	_ Date	September 10, 2	2019
Did yo ■ No □ Yes	u attach additional pages to Your Stateme	nt of Financial Ai	ffairs for Individuals	Filing for Bankruptcy (Official Form 107)?
■ No	u pay or agree to pay someone who is not	•	. ,	uptcy forms? ion, and Signature (Official Form 119).

United States Bankruptcy Court District of Puerto Rico, San Juan Division

In re	TORRES, GA	LO NI	EVES & MERLO, CL	ARITZA ROD	RIGUEZ		Case No.			
					Debtor(s)		Chapter	13		
	D	ISCL	OSURE OF CO	MPENSAT	TION OF AT	TORNEY	FOR D	DEBTOR		
co	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named do compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:							d to me, for services rendere	ed or to	
	For legal service	es, I h	ave agreed to accept			\$		4,000.00		
	Prior to the fili	ng of tl	his statement I have rec	eived		\$		470.00		
	Balance Due					\$		3,530.00		
2. Th	ne source of the co	mpens	sation paid to me was:							
	Debtor		Other (specify):							
3. Th	ne source of comp	ensatio	on to be paid to me is:							
	Debtor		Other (specify):							
4 . ■	I have not agree firm.	d to sh	are the above-disclosed	d compensation	with any other pe	erson unless tl	ney are men	nbers and associates of my l	aw	
			the above-disclosed co together with a list of					s or associates of my law fin tached.	rm. A	
5. In	return for the abo	ove-dis	closed fee, I have agree	ed to render lega	al service for all a	aspects of the	bankruptcy	case, including:		
b. c.	Preparation and	filing of the d	of any petition, schedule ebtor at the meeting of	es, statement of	affairs and plan v	which may be	required;	file a petition in bankruptcy	y;	
6. By	agreement with t	the deb	otor(s), the above-disclo	osed fee does no	t include the follo	owing service	:			
				CERT	IFICATION					
	ertify that the fore akruptcy proceeding		is a complete statemen	t of any agreem	ent or arrangeme	ent for paymer	t to me for	representation of the debtor	(s) in	
September 10, 2019				/s/ Peter S. Gonzalez						
Dat	te				Peter S. Gonz Signature of Att Peter Santiag	torney				
					Jardines de E Yauco, PR 00		-12			
					quiebrapr@g					
					Name of law fir	m				

© 2019 CINgroup 1.866.218.1003 - CINcompass (www.cincompass.com)

United States Bankruptcy Court District of Puerto Rico, San Juan Division

IN RE:		Case No
TORRES, GALO NIEVES & MERLO, C	LARITZA RODRIGUEZ	Chapter 13
	Debtor(s)	
	VERIFICATION OF CREDITOR M.	ATRIX
The above named debtor(s) hereby ve	rify(ies) that the attached matrix listing cre	ditors is true to the best of my(our) knowledge.
Date: September 10, 2019	Signature: /s/ GALO NIEVES TORRES	
	GALO NIEVES TORRES	Debtor
Date: September 10, 2019	Signature: /s/ CLARITZA RODRIGUEZ ME	ERLO
	CLARITZA RODRIGUEZ MERL	O Joint Debtor, if any

ARCELY RIVERA RODRIGUEZ Box 5008 PMB 155 YAUCO, PR 00698

ASOCIACION DE RESIDENTES ESTANCIAS DE YA PO Box 4069 Bayamon, PR 00958-1069

BANCO DE DESARROLLO ECONOMICO PO Box 2134 San Juan, PR 00922

BANCO POPULAR
PO Box 362708
San Juan, PR 00936-2708

CARIBE COOP APARTADO 464 GUAYANILLA, PR 00656-0464

CLARY GISELL NIEVES RODRIGUEZ ESTANCIAS DE YAUCO RUBI STRET B-21 YAUCO, PR 00698

DTOP PO Box 195349 San Juan, PR 00919-5349 GUSTAVO MATTEI RIVERA 1301 Springridge Rd Gautier, MS 39553-3132

ISLAND PORTFOLIO SERVICES, LLC PO Box 361110 San Juan, PR 00936-1110

LIC ANGEL AVILES MERCADO PO BOX 1254
Lajas, PR 00667

LUIS E MATTEI RIVERA 723 Orange St Ocean Springs, MS 39564-0703

SANTA ASTACIO ALMODOVAR PO BOX 1254 Lajas, PR 00667

SMALL BUSINESS ADMINISTRATION PO Box 3918 Portland, OR 97208-3918

SUC. ENRIQUE MATTEI CINTRON Box 5008 PMB 155 YAUCO, PR 00698

Fill in this information to identify your case:								
Debtor 1	GALO NIEVES TORRES							
Debtor 2 (Spouse, if filing)	CEARTIZA ROBRIGOLE INCRES							
United States Ba	ankruptcy Court for the:	District of Puerto Rico, San Juan Division						
Case number (if known)								

Check as directed in lines 17 and 21:								
According to the calculations required by this Statement:								
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruntry case 11 U.S.C. §

				Colu Debt	mn A or 1	 mn B or 2 or filing spouse
Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	mmissioı	ns (before all	\$	1,040.23	\$ 1,840.07
 Alimony and maintenance payments. Do not include Column B is filled in. 	e payme	nts from a	a spouse if	\$	0.00	\$ 0.00
All amounts from any source which are regularly p of you or your dependents, including child suppor from an unmarried partner, members of your household roommates. Do not include payments from a spouse. listed on line 3	t. Include I, your de	e regular ependents	contributions , parents, and	\$	0.00	\$ 0.00
 Net income from operating a business, profession, or farm 	Debtoi	1				
Gross receipts (before all deductions)	\$_	0.00				
Ordinary and necessary operating expenses	-\$_	0.00				
Net monthly income from a business, profession, or fa	arm \$_	0.00	Copy here ->	\$	0.00	\$ 0.00
6. Net income from rental and other real property	Debtoi					
Gross receipts (before all deductions)	\$_	0.00				
Ordinary and necessary operating expenses	-\$ _	0.00				
Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$ 0.00

Debtor 1 Debtor 2 TORRES, GALO NIEVES & MERLO, CLARITZA RODRIGUEZ

Case number (if known)

						Column A Debtor 1		Column B Debtor 2 onon-filing	or	
7.	Inter	est, dividends, and royalties				\$	0.00	\$	0.00	
8.	Unen	ployment compensation				\$	0.00	\$	0.00	
		ot enter the amount if you contend that I Security Act. Instead, list it here:	at the amount received was	a benefit under	the					
		r you		0.00						
	Fo	r your spouse	\$	0.00						
9.		ion or retirement income. Do not in the Social Security Act.	nclude any amount received	d that was a bend	efit	\$	0.00	\$	0.00	
10.	not in a vict	ne from all other sources not liste clude any benefits received under the im of a war crime, a crime against hu essary, list other sources on a separ	e Social Security Act or pay manity, or international or o	ments received domestic terroris	as					
						\$	0.00	\$	0.00	
						\$	0.00	\$	0.00	
		Total amounts from separate pag	es, if any.		+	\$	0.00	\$	0.00	
11.		ulate your total average monthly in column. Then add the total for Colu			1	,040.23	+ _	1,840.07	=[\$_	2,880.30
Part	2:	Determine How to Measure You	Deductions from Incom	ie						tal average onthly income
12. 13.	Copy	your total average monthly incorulate the marital adjustment. Chec	ne from line 11.						\$	2,880.30
	_	You are not married. Fill in 0 below.								
		You are married and your spouse is f	iling with you. Fill in 0 belo	W.						
		You are married and your spouse is r	not filing with you.							
		Fill in the amount of the income liste such as payment of the spouse's tax	d in line 11, Column B, the						s of you or	your dependents
		Below, specify the basis for excluding a separate page.	g this income and the amou	unt of income de	vote	d to each pu	ırpose. If ı	necessary, lis	t additional	adjustments on
		If this adjustment does not apply, ent	er 0 below.							
				\$			_			
				* +\$			_			
				_						
		Total		\$		0.0	<u>0</u> c	ppy here=>		0.00
14.	Υοι	r current monthly income. Subtra	ct line 13 from line 12.						\$	2,880.30
15.	Cal	culate your current monthly incon	ne for the year. Follow the	ese steps:						_
		Once Para 44 have	,						\$	2,880.30
	. 54	Multiply line 15a by 12 (the numb							x	12
	15b	. The result is your current monthly	income for the year for this	part of the form					\$	34,563.60

ebtor 1 ebtor 2	TORRES, GALO NIEVES & MERLO, CLARITZA RODRIGUEZ	Case number (if known)		
16. Cal	culate the median family income that applies to you. Follow these steps:			

16. Cal	culate the median family income that applies to yo	u. Follow these steps:		
16a.	Fill in the state in which you live.	PR		
16b.	Fill in the number of people in your household.	2		
	Fill in the median family income for your state and si	ze of household	¢ 24,349	9.00
100.	To find a list of applicable median income amounts, instructions for this form. This list may also be available.	go online using the link specified in the separate	\$ <u></u>	
17. Hov	do the lines compare?			
17a.	·	n the top of page 1 of this form, check box <i>Disposable inco</i> ill out <i>Calculation of Your Disposable Income</i> (Official Form		nder 11
17b.		f page 1 of this form, check box <i>Disposable income is dete</i> ation of Your Disposable Income (Official Form 122C-2) we.		
art 3:	Calculate Your Commitment Period Under 11 U.	S.C. § 1325(b)(4)		
8. Co p	y your total average monthly income from line 11		\$ 2,8	380.30
that	uct the marital adjustment if it applies. If you are m calculating the commitment period under 11 U.S.C. § 7 me, copy the amount from line 13.	arried, your spouse is not filing with you, and you contend 1325(b)(4) allows you to deduct part of your spouse's		
	If the marital adjustment does not apply, fill in 0 on li	ne 19a.	-\$	0.00
19b.	Subtract line 19a from line 18.		\$\$	0.30
0. Cald	culate your current monthly income for the year.	Follow these steps:		
20a.	Copy line 19b	·	\$2,880	0.30
	Multiply by 12 (the number of months in a year).		x 12	
20b.	The result is your current monthly income for the year	for this part of the form	\$34,563	3.60_
20c.	Copy the median family income for your state and size	e of household from line 16c	\$24,349	9.00
21.	How do the lines compare?		L	
	☐ Line 20b is less than line 20c. Unless otherwise <i>is 3 years</i> . Go to Part 4.	ordered by the court, on the top of page 1 of this form, chec	k box 3, The commitme	nt peri
	Line 20b is more than or equal to line 20c. Unless commitment period is 5 years. Go to Part 4.	s otherwise ordered by the court, on the top of page 1 of thi	s form, check box 4, The	е
art 4:	Sign Below			
By s	igning here, under penalty of perjury I declare that the i	information on this statement and in any attachments is true	and correct.	
X /s/	GALO NIEVES TORRES	X /s/ CLARITZA RODRIGUEZ ME	RLO	
G	ALO NIEVES TORRES	CLARITZA RODRIGUEZ MERL		
	nature of Debtor 1	Signature of Debtor 2		
Date	September 10, 2019	Date September 10, 2019		
.,	MM / DD / YYYY	MM / DD / YYYY		
•	u checked 17a, do NOT fill out or file Form 122C-2.	to form On the On of the Con		
If yo	u checked 17b, fill out Form 122C-2 and file it with th	is form. On line 39 of that form, copy your current monthly	income from line 14 ab	ove

Fill in this information to identify your case:								
Debtor 1	GALO NIEVES TORRES							
Debtor 2 (Spouse, if filing	Debtor 2							
United States B	ankruptcy Court for the:	District of Puerto Rico, San Juan Division						
Case number (if known)								

☐ Check if this is an amended filing

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/19

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C–1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122G-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2 Living 0 Housing

National Standards

You must use the IRS National Standards to answer the guestions in lines 6-7.

5. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

1,288.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Debtor	
Debtor	•

7		ho are under 65 years of age							
	7a.	Out-of-pocket health care allowance per person	\$	55	-				
7	7b.	Number of people who are under 65	x	1					
7	7c.	Subtotal. Multiply line 7a by line 7b.	\$	55.00		Copy here=	> \$	55.00	
eop	le w	ho are 65 years of age or older							
7	7d.	Out-of-pocket health care allowance per person	\$	114					
7	7e.	Number of people who are 65 or older	x	1					
7	7f.	Subtotal. Multiply line 7d by line 7e.	\$	114.00		Copy here=	> \$	114.00	
7	7g.	Total. Add line 7c and line 7f			\$	169.00		Copy total here=	> \$ 169.00
.ocal	Sta	undards You must use the IRS Local Standards to	o answei	the questic	ons in line	es 8-15.			
		n information from the IRS, the U.S. Trustee Prog	ram has	divided the	e IRS Lo	cal Standard	for h	ousing for bank	ruptcy
		sing and utilities - Insurance and operating expe			inei oi pe	eoble vou ente	ileu i	n ine o, illi in	
). i	Hou	dollar amount listed for your county for insurance and sing and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expenses.	ill in the		nt		\$	542.00	510.00
). i	Hou Đa.	sing and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages and	ill in the o	dollar amou	d by your		\$	542.00	510.00
). I	Hou Đa.	sing and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expenses.	ill in the o	dollar amou ebts secured ounts that a	d by your ire		\$	542.00	510.00
). I	Hou Đa.	sing and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages and To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 in the formula of the for	d other ded all am months a	dollar amou ebts secured ounts that a	d by your ire for		\$	542.00	510.00
). I	Hou Đa.	using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages and To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 is bankruptcy. Next divide by 60.	d other ded all am months a	dollar amou ebts secured ounts that a fter you file verage mo ayment	d by your ire for		\$	542.00	510.00
). I	Hou Đa.	sing and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages and To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 mbankruptcy. Next divide by 60. Name of the creditor	d other dod all am months a	dollar amou ebts secured ounts that a fter you file verage mo ayment 1,6	d by your are for nthly		\$	542.00	510.00
). I	Hou Đa.	using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages and To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 bankruptcy. Next divide by 60. Name of the creditor BANCO DE DESARROLLO ECONOMICO	d other dod all ammonths a	ebts secured ounts that a fter you file verage mo ayment	d by your tree for nthly 622.00		-\$_	542.00	Repeat this amount
(c	Hou	sing and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages and To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 mbankruptcy. Next divide by 60. Name of the creditor BANCO DE DESARROLLO ECONOMICO BANCO POPULAR	d other dod all ammonths a	ebts secured ounts that a fter you file verage mo ayment	d by your are for nthly 622.00 133.66	home.			Repeat this amount
(((((((((((((((((((Hou	using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages and To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 mbankruptcy. Next divide by 60. Name of the creditor BANCO DE DESARROLLO ECONOMICO BANCO POPULAR 9b. Total average monthly payment.	d other ded all ammonths a	ebts secured ounts that a fter you file verage mo ayment 1,6	d by your are for nthly 622.00 133.66	home.			Repeat this amount on line 33a.

11.	Loc	al transportation expenses: Check the number of vehicle	es for which you claim an	ownership or ope	erating exp	ense.	
	= 0	. Go to line 14.					
	□ 1	. Go to line 12.					
		or more. Go to line 12.					
12.		icle operation expense: Using the IRS Local Standards enses, fill in the Operating Costs that apply for your Census			ı claim the	e operating \$	0.00
13.	may	icle ownership or lease expense: Using the IRS Local S not claim the expense if you do not make any loan or lease vehicles.					
Vel	nicle	1 Describe Vehicle 1:					
13a.	Owr	nership or leasing costs using IRS Local Standard		\$	0.00		
13b.	Ave	rage monthly payment for all debts secured by Vehicle 1.					
	Do r	not include costs for leased vehicles.					
	cont	calculate the average monthly payment here and on line 1 ractually due to each secured creditor in the 60 months after a divide by 60.					
		Name of each creditor for Vehicle 1	Average monthly payment				
			\$	_			
		Total Average Monthly Payment	\$	Copy here => -\$	0	Repeat this amount on line 33b.	
13c.		Vehicle 1 ownership or lease expense tract line 13b from line 13a. if the numbert is less than \$0	, enter \$0	\$	0.00	Copy net Vehicle 1 expense here => \$ _	0.00
Vel	nicle	2 Describe Vehicle 2:				_	
13d.	Owr	nership or leasing costs using IRS Local Standard		\$	0.00		
13e.		rage monthly payment for all debts secured by Vehicle 2. Ded vehicles.	o not include costs for				
		Name of each creditor for Vehicle 2	Average monthly payment				
			\$				
		Total average monthly payment	\$	Copy here => -\$	0.0	Repeat this amount on line 33c.	
13f.		Vehicle 2 ownership or lease expense tract line 13e from line 13d. if this number is less than \$0,	enter \$0	\$	0.00	Copy net Vehicle 2 expense here => \$ _	0.00
14.		lic transportation expense: If you claimed 0 vehicles i			ls, fill in tl	he \$	217.00
15.	Add	itional public transportation expense: If you claimed 1 uct a public transportation expense, you may fill in what you e than the IRS Local Standard for Public Transportation.	or more vehicles in line	11 and if you cla			0.00

Oth	her Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.		
16.	Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.	\$	199.44
	Do not include real estate, sales, or use taxes.	» —	133.44
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.		
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	129.84
18.	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$	0.00
19.	Court-ordered payments : The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.		
	Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly amount that you pay for education that is either required:		
	as a condition for your job, or		
	for your physically or mentally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments for any elementary or secondary school education.	\$	0.00
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.	•	0.00
	Payments for health insurance or health savings accounts should be listed only in line 25.	\$	0.00
23.	Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.	+\$	0.00
24.	Add all of the expenses allowed under the IRS expense allowances.	\$	2,513.28
	Add lines 6 through 23.		
Ad	ditional Expense Deductions These are additional deductions allowed by the Means Test.		
	Note: Do not include any expense allowances listed in lines 6-24.		
25.	Note: Do not include any expense allowances listed in lines 6-24. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or you dependents.	r	
25.	Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or you	r	
25.	Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or you dependents. Health insurance \$ 0.00	r	
25.	Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or you dependents. Health insurance \$ 0.00 Disability insurance \$ 0.00	ır	
25.	Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or you dependents. Health insurance \$ 0.00	ır	
25.	Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or you dependents. Health insurance \$ 0.00 Disability insurance \$ 0.00	ır \$	0.00
25.	Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or you dependents. Health insurance \$ 0.00 Disability insurance \$ 0.00 Health savings account + \$ 0.00 Copy total here=>		0.00
25.	Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or you dependents. Health insurance \$ 0.00 Disability insurance \$ 0.00 Health savings account + \$ 0.00		0.00
25.	Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or you dependents. Health insurance \$ 0.00 Disability insurance \$ 0.00 Health savings account + \$ 0.00 Total \$ 0.00 Copy total here=>		0.00
	Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or you dependents. Health insurance \$ 0.00 Disability insurance \$ 0.00 Health savings account +\$ 0.00 Total \$ 0.00 Copy total here=>		0.00
26.	Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or you dependents. Health insurance \$ 0.00 Disability insurance \$ 0.00 Health savings account + \$ 0.00 Total \$ 0.00 Copy total here=> Do you actually spend this total amount? No. How much do you actually spend? Yes \$	\$\$	
26.	Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or you dependents. Health insurance \$ 0.00 Disability insurance \$ 0.00 Health savings account +\$ 0.00 Total \$ 0.00 Copy total here=> Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b). Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of	\$\$	

28.	Additional home energy costs. Your home	energy costs are included in your insurance and operat	ting expens	ses on line	8.		
		s that are more than the home energy costs included in					
	You must give your case trustee documentation claimed is reasonable and necessary.	on of your actual expenses, and you must show that the	e additional	amount	9	\$	0.00
		en who are younger than 18. The monthly expenses ndent children who are younger than 18 years old to att			ic		
	You must give your case trustee documentation reasonable and necessary and not already according to the control of the control	on of your actual expenses, and you must explain why the counted for in lines 6-23.	he amount	claimed is	3		
	* Subject to adjustment on 4/01/22, and every	3 years after that for cases begun on or after the date of	of adjustm	ent.	9	\$	0.00
		e monthly amount by which your actual food and clothing ices in the IRS National Standards. That amount cann National Standards.					
	To find a chart showing the maximum addition this form. This chart may also be available at the state of the	nal allowance, go online using the link specified in the se he bankruptcy clerk's office.	eparate ins	structions f	or		
	You must show that the additional amount claim	med is reasonable and necessary.			,	\$	0.00
	Continuing charitable contributions. The a instruments to a religious or charitable organize	amount that you will continue to contribute in the form of cation. 11 U.S.C. \S 548(d)(3) and (4).	f cash or fi	nancial			
	Do not include any amount more than 15% of	of your gross monthly income.				\$	0.00
	Add all of the additional expense deduction Add lines 25 through 31.	ons.			\$		0.00
Dedu	actions for Debt Payment						
ാറ 🗖	'ar dahta that are accured by an interest in	numerous that was associated in a home mouth and	a vahiala	laana			
a T	nd other secured debt, fill in lines 33a thro	, add all amounts that are contractually due to each sec					
a T	nd other secured debt, fill in lines 33a thro o calculate the total average monthly payment	ough 33e. , add all amounts that are contractually due to each sec				erage mont	thly
a T	nd other secured debt, fill in lines 33a thro To calculate the total average monthly payment the 60 months after you file for bankruptcy. The Mortgages on your home	ough 33e. , add all amounts that are contractually due to each sec en divide by 60.	cured credi			yment	
a T th	nd other secured debt, fill in lines 33a throfo calculate the total average monthly payment ne 60 months after you file for bankruptcy. The Mortgages on your home Copy line 9b here	ough 33e. , add all amounts that are contractually due to each sec	cured credi	tor in			
a T th	nd other secured debt, fill in lines 33a thro to calculate the total average monthly payment ne 60 months after you file for bankruptcy. The Mortgages on your home Copy line 9b here Loans on your first two vehicles	ough 33e. , add all amounts that are contractually due to each secen divide by 60.	cured credi	tor in		yment 2,05	5.66
33a.	nd other secured debt, fill in lines 33a thro to calculate the total average monthly payment the 60 months after you file for bankruptcy. The Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here	ough 33e. , add all amounts that are contractually due to each sec en divide by 60.	cured credi	=> =>		yment 2,05	5.66 0.00
33a. 33b. 33c.	nd other secured debt, fill in lines 33a thro to calculate the total average monthly payment ne 60 months after you file for bankruptcy. The Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here	ough 33e. , add all amounts that are contractually due to each secen divide by 60.	cured credi	=> =>		yment 2,05	5.66
33a. 33b. 33c. 33d.	nd other secured debt, fill in lines 33a thro to calculate the total average monthly payment the 60 months after you file for bankruptcy. The Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here	ough 33e. , add all amounts that are contractually due to each sec en divide by 60.	Does include	=> =>		yment 2,05	5.66 0.00
33a. 33b. 33c. 33d.	nd other secured debt, fill in lines 33a thro to calculate the total average monthly payment the 60 months after you file for bankruptcy. The Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts	ough 33e. , add all amounts that are contractually due to each sec en divide by 60.	Does includor insu	=> => payment e taxes urance?		yment 2,05	5.66 0.00
33a. 33b. 33c. 33d.	nd other secured debt, fill in lines 33a thro to calculate the total average monthly payment the 60 months after you file for bankruptcy. The Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts the of each creditor for other secured debt	ough 33e. , add all amounts that are contractually due to each sec en divide by 60.	Does includor insu	=> => payment e taxes urance?	\$ _ \$ _ \$ _	yment 2,05	5.66 0.00
33a. 33b. 33c. 33d.	nd other secured debt, fill in lines 33a thro to calculate the total average monthly payment the 60 months after you file for bankruptcy. The Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts	ough 33e. , add all amounts that are contractually due to each sec en divide by 60.	Does includor insu	=> => payment e taxes urance?		yment 2,05	5.66 0.00
33a. 33b. 33c. 33d.	nd other secured debt, fill in lines 33a thro to calculate the total average monthly payment the 60 months after you file for bankruptcy. The Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts the of each creditor for other secured debt	ough 33e. , add all amounts that are contractually due to each sec en divide by 60.	Does includ or insu	=> => payment e taxes urance?	\$ _ \$ _ \$ _	yment 2,05	5.66 0.00
33a. 33b. 33c. 33d.	nd other secured debt, fill in lines 33a thro to calculate the total average monthly payment the 60 months after you file for bankruptcy. The Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts the of each creditor for other secured debt	ough 33e. , add all amounts that are contractually due to each sec en divide by 60.	Does includor insu	=> => payment e taxes urance? No 'es	\$ _ \$ _ \$ _	yment 2,05	5.66 0.00
33a. 33b. 33c. 33d.	nd other secured debt, fill in lines 33a thro to calculate the total average monthly payment the 60 months after you file for bankruptcy. The Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts the of each creditor for other secured debt	ough 33e. , add all amounts that are contractually due to each sec en divide by 60.	Does includ or insu	=> => payment e taxes urance?	\$ _ \$ _ \$ _	yment 2,05	5.66 0.00
33a. 33b. 33c. 33d.	nd other secured debt, fill in lines 33a thro to calculate the total average monthly payment the 60 months after you file for bankruptcy. The Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts the of each creditor for other secured debt	ough 33e. , add all amounts that are contractually due to each sec en divide by 60.	Does includ or insu	=> => payment e taxes urance? No 'es	\$ _ \$ _ \$ _	yment 2,05	5.66 0.00
33a. 33b. 33c. 33d.	nd other secured debt, fill in lines 33a thro to calculate the total average monthly payment the 60 months after you file for bankruptcy. The Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts the of each creditor for other secured debt	ough 33e. , add all amounts that are contractually due to each sec en divide by 60.	Does includ or insu	=> => payment e taxes urance?	\$ _ \$ _ \$ _	yment 2,05	5.66 0.00
33a. 33b. 33c. 33d.	nd other secured debt, fill in lines 33a thro to calculate the total average monthly payment the 60 months after you file for bankruptcy. The Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts the of each creditor for other secured debt	ough 33e. , add all amounts that are contractually due to each sec en divide by 60.	Does includ or insu	=> => payment e taxes urance? No 'es	\$ _ \$ _ \$ _ \$	yment 2,05	5.66 0.00

34. Are any debts that you listed in lin other property necessary for your				or		
☐ No. Go to line 35.						
 Yes. State any amount that yo line 33, to keep possessio 60 and fill in the information 	n of your property (called the c					
Name of the creditor	Identify property that secu	res the debt		Total cure amount	Mon amo	thly cure unt
BANCO DE DESARROLLO ECONOMICO	Residence		\$	19,999.80	÷ 60 = \$	333.33
			\$		÷ 60 = \$	
	_		\$		÷ 60 = +\$	
			Total	\$333.33	Copy total here=>	333.33
35. Do you owe any priority claims - s are past due as of the filing date of				:		
■ No. Go to line 36.						
☐ Yes. Fill in the total amount of priority claims, such as the		not include o	current or ong	oing		
Total amount of all past-	due priority claims			0.00	<u> </u>	0.00
36. Projected monthly Chapter 13 pla	n payment		9	.	_	
Current multiplier for your district as Office of the United States Courts (f Executive Office for United States To find a list of district multipliers that inc separate instructions for this form. This li	for districts in Alabama and Norustees (for all other districts). Fludes your district, go online using	orth Carolina) g the link specif	or by the ied in the	·	Copy total	
Average monthly administrative expe	nse			\$	here=> \$	
37. Add all of the deductions for deb Add lines 33e through 36.	ot payment.				\$	2,388.99
Total Deductions from Income						
38. Add all of the allowed deductions						
Copy line 24, All of the expenses a expense allowances	llowed under IRS	\$	2,513.28			
Copy line 32, All of the additional ex	xpense deductions	\$	0.00	-		
Copy line 37, All of the deductions	for debt payment	+\$	2,388.99	_		
Total deductions		\$	4,902.27	Copy total here=	> \$	4,902.27

Debtor 1 Debtor 2

TORRES, GALO NIEVES & MERLO, CLARITZA

R	O	D	R	IG	U	ΕZ

Case number (if known)

Part 2: De	termine You	r Disposable Income Under 11 U	.S.C. § 1325(b)(2)				
		ent monthly income from line 14 urrent Monthly Income and Cald					\$\$
childrer disability in accor	The monthly payments fo	y necessary income you receive of average of any child support payor of a dependent child, reported in Policable nonbankruptcy law to the eld.	nents, foster care part I of Form 122C-	ayments, or -1, that you receive	ed \$_	0.	.00_
employe U.S.C. § 11 U.S.0	r withheld fron 541(b)(7) plu C. § 362(b)(19		ed retirement plans from retirement pla	, as specified in 11 ns, as specified in	\$_	0.	00
42. Total of	all deduction	ns allowed under 11 U.S.C. § 707	(b)(2)(A). Copy line	e 38 here=>	\$_	4,902.	.27
and you expense	have no reasc s. You must g	al circumstances. If special circum onable alternative, describe the spe ive your case trustee a detailed exp the expenses.	cial circumstances	and their			
Describe th	e special circ	cumstances		Amount of expen	se		
			\$				
			\$				
			\$				
					ا		
			Total \$	0.00	Copy here=		0.00
44. Total ad	ljustments. A	dd lines 40 through 43		=> \$		4,902.27	Copy here=> -\$ 4,902.27
45. Calcula	te your mont	hly disposable income under §	1 325(b)(2). Subtrac	ct line 44 from line	39.		\$
Part 3: Cl	nange in Inco	me or Expenses					
in this for bankrup example column,	orm have chang tcy petition and , if the wages enter line 2 in	r expenses. If the income in Form ged or are virtually certain to change d during the time your case will be reported increased after you filed y the second column, explain why the fill in the amount of the increase.	e after the date you open, fill in the infor our petition, check	rmation below. For 122C-1 in the first	ed		
Form	Line	Reason for change		Date of change		ncrease or ecrease?	Amount of change
☐ 122C-1 ☐ 122C-2 ☐ 122C-1 ☐ 122C-2 ☐ 122C-1 ☐ 122C-2 ☐ 122C-1 ☐ 122C-1 ☐ 122C-2					_ [_ [_ [_ [Increase Decrease Increase Decrease Increase Decrease Increase Decrease Decrease Decrease	\$ \$ \$
					_		

Debtor 1 Debtor 2	TORRES, GALO NIEVES & MERLO, CLARITZA RODRIGUEZ	Case number (if known)		
Dom /	Circ Dalam			
Part 4:	Sign Below By signing here, under penalty of perjury you declare that the information	tion on	this statement and in any attachments is true and correct.	
X.	/s/ GALO NIEVES TORRES GALO NIEVES TORRES Signature of Debtor 1	X	/s/ CLARITZA RODRIGUEZ MERLO CLARITZA RODRIGUEZ MERLO Signature of Debtor 2	
Date	September 10, 2019 MM / DD / YYYY	Date	September 10, 2019 MM / DD / YYYY	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

© 2019 CINgroup 1.866.218.1003 - CINcompass (www.cincompass.com)

United States Bankruptcy Court District of Puerto Rico, San Juan Division

IN RE:	Case No	
TORRES, GALO NIEVES & MERLO, CLARITZA RODRIGUEZ	Chapter 13	
Debtor(s) CERTIFICATION OF NOTIC	E TO CONSUMER DEBTOR(S)	
	E BANKRUPTCY CODE	
Certificate of [Non-Attorney]	Bankruptcy Petition Preparer	
I, the [non-attorney] bankruptcy petition preparer signing the debto notice, as required by § 342(b) of the Bankruptcy Code.	or's petition, hereby certify that I delivered to	the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	petition preparer is n the Social Security n	
X		
Certificate	of the Debtor	
I (We), the debtor(s), affirm that I (we) have received and read the	attached notice, as required by § 342(b) of the	e Bankruptcy Code.
TORRES, GALO NIEVES & MERLO, CLARITZA RODRIGUEZ	X /s/ GALO NIEVES TORRES	9/10/2019
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X /s/ CLARITZA RODRIGUEZ MERLO	9/10/2019

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Signature of Joint Debtor (if any)

Date